

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin-top: 10px;">(to be used for all correspondence after initial filing)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Application Number</td> <td>10/783,548-Conf. #7427</td> </tr> <tr> <td>Filing Date</td> <td>February 20, 2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Mark L LA FOREST</td> </tr> <tr> <td>Art Unit</td> <td>1791</td> </tr> <tr> <td>Examiner Name</td> <td>J. M. Wollschlager</td> </tr> <tr> <td>Attorney Docket Number</td> <td>H0005333-1160 (2929-0251P)</td> </tr> </table>	Application Number	10/783,548-Conf. #7427	Filing Date	February 20, 2004	First Named Inventor	Mark L LA FOREST	Art Unit	1791	Examiner Name	J. M. Wollschlager	Attorney Docket Number	H0005333-1160 (2929-0251P)
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ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	BIRCH, STEWART, KOLASCH & BIRCH, LLP	
Signature	# 28781	
Printed name	D. Richard Anderson	
Date	February 14, 2008	Reg. No. 40,439